| United States Bankruptcy Court Middle District of Pennsylvania | | | | | | | | | | Voluntary Petition | | | |
|---|--|---------------------------|-----------------------------|-----------------------------------|--|--|-------------------------------------|--|----------|------------------------------|----------------------------------|---|---|
| | Name of Debtor (if individual, enter Last, First, Middle): Smith, Ericka, L. | | | | | | | Name of Joint Debtor (Spouse) (Last, First, Middle): | | | | | |
| | All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): | | | | | | | l Other Names clude married | | | Debtor in the last 8 y names): | ears . | |
| | four digits of Soc. one, state all): | Sec. or Indivi | dual-Taxpay | er I.D. (ITI | N)/Co | omplete EIN(if | | st four digits (e, state all): | of Soc | . Sec. or Indiv | vidual-Taxpayer I.D. | . (ITIN)/Con | nplete EIN(if more than |
| 27 | et Address of Deb 78 Sportsman eeders, PA | | eet, City, and | d State): | | | Stı | reet Address o | of Join | t Debtor (No. | & Street, City, and | State): | |
| | • | C.I. D. | ' 1 DI (| | CODE | 1835 | | CD 1 | | Cal. D. | ' 1 Dl C D | ZIP COL | DE |
| | nty of Residence onroe | or of the Princ | cipal Place of | Business: | | | Co | ounty of Resid | ence o | or of the Princ | ipal Place of Busine | ess: | |
| P | ling Address of Do Box 497 | ebtor (if differ | rent from stre | et address) | : | | Ma | ailing Address | of Jo | int Debtor (if | different from street | address): | |
| R | eeders, PA | | | ZIP | CODE | 1835 | 2 | | | | | ZIP COI | DE |
| Locat | ion of Principal A | Assets of Busin | ness Debtor (i | f different | from s | | | | | | | | |
| | Т | vne of Debto | nr . | | | Natur | e of Rusines | c | 1 | Char | oter of Bankruptcy | ZIP COD | |
| Type of Debtor (Form of Organization) (Check one box.) Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. Corporation (includes LLC and LLP) | | | | | Nature of Busine (Check one box) Health Care Business Single Asset Real Estate as U.S.C. § 101(51B) Railroad | | | | V | - | the Petition is Filed | d (Check on Chapter 15 Recognition Main Proc | ne box) 5 Petition for on of a Foreign |
| | Partnership Other (If debtor | is not one of | the above ent | ities. | _ | Stockbroker Commodity B | roker | | | Chapter 12 | | on of a Foreign Proceeding | |
| | check this box a | | | | | Clearing Bank Other | (| , | | Chapter 13 | Nature o | | |
| Tax-Exempt E (Check box, if app □ Debtor is a tax-exempt under Title 26 of the United States of the United State | | | | oox, if applicat x-exempt orga | ole) nization 1 States | debts, defined in 11 U.S.C. \$ 101(8) as "incurred by an individual primarily for a personal, family, or house-hold purpose." debts, defined in 11 U.S.C. business debts. business debts. purpose. | | | | | | | |
| | | Filing | g Fee (Check | one box) | | | | Check one | hov: | 1 1 1 | Chapter 11 Debt | tors | |
| | Full Filing Fee att | | | | | | | ☐ Debtor | is a sr | | debtor as defined in | _ | , , |
| 5 | Filing Fee to be p signed application | for the court's | s consideration | on certifyin | g that | the debtor is | | Debtor Check if: | 1s not | a small busin | ess debtor as defined | d in 11 U.S. | C. § 101(51D). |
| | unable to pay fee of Filing Fee waiver attach signed app | requested (ap | plicable to cl | hapter 7 in | dividu | als only). Mus | st | Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,343,300 (amount subject to adjustment on 4/01/13 and every three years thereafter). Check all applicable boxes | | | | | |
| | attaen signed app. | neation for the | c court's cons | ideration. | occ Oi | meiai Poini 31 | J. | A plan is being filed with this petition Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b). | | | | | |
| Statistical/Administrative Information Debtor estimates that funds will be available for distribution to unsecured creditors. | | | | | ereditors. | 97 6160 | 11015, 1 | | | 120(0). | THIS SPACE IS FOR COURT USE ONLY | | |
| Ø | Debtor estimates expenses paid, the | | | • | | | | | | | | | |
| Estin | mated Number of | Creditors | | | | | | | |] | | | |
| 1- 49 | 50- 99 | 100- 199 | | 1,000- 5,000 | 5,001 10,00 | | | 50,001- 100,000 | | ver 00,000 | | | |
| \$0 to \$50, | 000 \$100,000 | \$100,001 to \$500,000 | \$500,001 \$1 million | to \$1,000 to \$10 millior | ,001 | \$10,000,001 to \$50 million | \$50,000,001 to \$100 million | \$100,000,000 to \$500 million |)1 \$ | 500,000,001 o \$1 billion | More than \$1 billion | | |
| ₹ 0 to | nated Liabilities | \$100,001 to \$500,000 | \$500,001 \$1 million | to \$1,000 to \$10 million | | \$10,000,001 to \$50 million | \$50,000,001 to \$100 million | \$100,000,00 to \$500 million |)1 \$ | 500,000,001 o \$1 billion | More than \$1 billion | | |

B1 (Official Form 1) (4/10) FORM B1, Page 2

| DI (Olliciai I oll | 1)(1,10) | | 1 014.1 21, 1 450 2 | | | | |
|--|--|--|---------------------|--|--|--|--|
| Voluntary Peti | | Name of Debtor(s): | | | | | |
| (This page must | be completed and filed in every case) | Ericka L. Smith | | | | | |
| | All Prior Bankruptcy Cases Filed Within La | ast 8 Years (If more than two, attach additional sheet.) | _ | | | | |
| Location Where Filed: | NONE | Case Number: | Date Filed: | | | | |
| Location Where Filed: | | Case Number: | Date Filed: | | | | |
| | Pending Bankruptcy Case Filed by any Spouse, Partner of | r or Affiliate of this Debtor (If more than one, attach additional sheet) | | | | | |
| Name of Debtor: | | Case Number: | Date Filed: | | | | |
| NONE District: | | Relationship: | Judge: | | | | |
| Districti | | | | | | | |
| 10Q) with the Secur of the Securities Exc | Exhibit A debtor is required to file periodic reports (e.g., forms 10K and ities and Exchange Commission pursuant to Section 13 or 15(d) change Act of 1934 and is requesting relief under chapter 11.) | Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b). | | | | | |
| Exhibit A is at | ttached and made a part of this petition. | X /s/ Philip W. Stock | 5/16/2014 | | | | |
| | | Signature of Attorney for Debtor(s) Philip W. Stock, Esquire | Date 53203 | | | | |
| | Ex | hibit C | 00200 | | | | |
| | Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. | | | | | | |
| | Ext | hibit D | | | | | |
| (To be completed by | y every individual debtor. If a joint petition is filed, each spouse mus | st complete and attach a separate Exhibit D.) | | | | | |
| ✓ Exhibit D | completed and signed by the debtor is attached and made a part of t | this petition | | | | | |
| _ | | F | | | | | |
| If this is a joint petit | | | | | | | |
| Exhibit D | also completed and signed by the joint debtor is attached and made | a part of this petition. | | | | | |
| | | y applicable box) | | | | | |
| ☑ | Debtor has been domiciled or has had a residence, principal place preceding the date of this petition or for a longer part of such 180 | | ays immediately | | | | |
| | There is a bankruptcy case concerning debtor's affiliate. general particles | artner, or partnership pending in this District. | | | | | |
| | Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District. or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. | | | | | | |
| | _ | des as a Tenant of Residential Property pplicable boxes.) | | | | | |
| | Landlord has a judgment against the debtor for possession of debtor | or's residence. (If box checked, complete the following). | | | | | |
| | | (Name of landlord that obtained judgment) | | | | | |
| | | (Address of landlord) | | | | | |
| | Debtor claims that under applicable nonbankruptcy law, there are entire monetary default that gave rise to the judgment for possession | | ed to cure the | | | | |
| | Debtor has included in this petition the deposit with the court of a filing of the petition. | ny rent that would become due during the 30-day period | l after the | | | | |
| | Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)). | | | | | | |

FORM B1, Page 3 **B1** (Official Form 1) (4/10) Voluntary Petition Name of Debtor(s): (This page must be completed and filed in every case) Ericka L. Smith Signatures Signature(s) of Debtor(s) (Individual/Joint) Signature of a Foreign Representative I declare under penalty of perjury that the information provided in this petition is true I declare under penalty of perjury that the information provided in this petition is true and correct. and correct, that I am the foreign representative of a debtor in a foreign proceeding, [If petitioner is an individual whose debts are primarily consumer debts and has and that I am authorized to file this petition. chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 (Check only one box.) or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. I request relief in accordance with chapter 15 of Title 11, United States Code. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I Certified Copies of the documents required by § 1515 of title 11 are attached. have obtained and read the notice required by 11 U.S.C. § 342(b). Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the I request relief in accordance with the chapter of title 11, United States Code, specified Chapter of title 11 specified in the petition. A certified copy of the order granting recognition of the foreign main proceeding is attached. in this petition. X /s/ Ericka L. Smith X Not Applicable Signature of Debtor Ericka L. Smith (Signature of Foreign Representative) X Not Applicable (Printed Name of Foreign Representative) Signature of Joint Debtor Telephone Number (If not represented by attorney) Date 5/16/2014 Date Signature of Attorney Signature of Non-Attorney Petition Preparer X/s/ Philip W. Stock I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined Signature of Attorney for Debtor(s) in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 Philip W. Stock, Esquire Bar No. 53203 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been Printed Name of Attorney for Debtor(s) / Bar No. promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, Law Office of Philip W. Stock as required in that section. Official Form 19 is attached. Firm Name 706 Monroe Street Stroudsburg, PA 18360 Not Applicable Address Printed Name and title, if any, of Bankruptcy Petition Preparer Social-Security number (If the bankruptcy petition preparer is not an individual, state Telephone Number the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.) 5/16/2014 Date *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a Address certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect. X Not Applicable Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above. The debtor requests the relief in accordance with the chapter of title 11, United States Code, specified in this petition. Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an **X** Not Applicable individual. Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

If more than one person prepared this document, attach to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

UNITED STATES BANKRUPTCY COURT Middle District of Pennsylvania

| In re | Ericka L. Smith | Case No. | |
|-------|-----------------|----------|------------|
| | Debtor | <u> </u> | (if known) |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

| 1. Within the 180 days before the filing of my bankruptcy case , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency. |
|--|
| 2. Within the 180 days before the filing of my bankruptcy case , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed. |
| ☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] |
| |

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

| | not required to receive a credit counseling briefing because of: [Check the applicable accompanied by a motion for determination by the court.] |
|--------------------------------|---|
| mental defic responsibiliti | Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or iency so as to be incapable of realizing and making rational decisions with respect to financial ies.); |
| unable, after through the | Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being r reasonable effort, to participate in a credit counseling briefing in person, by telephone, or Internet.); |
| | Active military duty in a military combat zone. |
| | United States trustee or bankruptcy administrator has determined that the credit counseling S.C. '109(h) does not apply in this district. |
| I certify unc | der penalty of perjury that the information provided above is true and correct. |
| Signature of Debtor: | /s/ Ericka L. Smith |
| | Ericka L. Smith |
| | |

B 1D (Official Form 1, Exh. D) (12/09) - Cont.

Date: 5/16/2014

Certificate Number: 00555-PAM-CC-022745450



CERTIFICATE OF COUNSELING

**CURTIFY that on February 10, 2014, at 9:55 o'clock AM EST, Ericka L Smith coved from Advisory Credit Management, Inc., an agency approved pursuant to 11 U.S.C. \$ 111 to provide credit counseling in the Middle District of Pennsylvagia, an individual for group] briefing that complied with the provisions of 11 U.S.C. \$\$ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a sequent the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

| igni. | Historian (10, 2014) | By | /s/Lourdes Pesante |
|-------|----------------------|----------|--|
| | | N(11) 40 | Lourdes Pesante |
| | | Title: | Certified Debt Management Professional |

their counts who wish to tile a bank uptry case under title 11 of the United States Bankruptcy of the rescaled to the with the United States Bankruptcy Court a completed certificate of the ellips from the hoopprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the tradit counseling agency. See 11 USC, 28 109(h) and 524(h).

B6A (Official Form 6A) (12/07)

| In re: | Ericka L. Smith | Case No. |
|--------|-----------------|------------|
| | Debtor | (If known) |

SCHEDULE A - REAL PROPERTY

| DESCRIPTION AND LOCATION OF PROPERTY | NATURE OF DEBTOR'S INTEREST IN PROPERTY | HUSBAND, WIFE, JOINT OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION | AMOUNT OF SECURED CLAIM |
|--|--|-----------------------------------|--|-------------------------------|
| NONE | | | | |
| | Total | > | 0.00 | |

(Report also on Summary of Schedules.)

| In re | Ericka L. Smith | Case No. | |
|-------|-----------------|----------|------------|
| | Debtor | , | (If known) |

SCHEDULE B - PERSONAL PROPERTY

| TYPE OF PROPERTY | NONE | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|---|------|---|--------------------------------------|---|
| 1. Cash on hand | | Cash | | 20.00 |
| Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | | Checking PNC Bank | | 263.00 |
| Security deposits with public utilities, telephone companies, landlords, and others. | X | | | |
| Household goods and furnishings, including audio, video, and computer equipment. | | Household Goods | | 1,550.00 |
| Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | | Books & Pictures | | 200.00 |
| 6. Wearing apparel. | | Clothing | | 350.00 |
| 7. Furs and jewelry. | | Jewelry | | 250.00 |
| Firearms and sports, photographic, and other hobby equipment. | | Firearm | | 250.00 |
| Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | | Erie Life - term policy | | Unknown |
| 10. Annuities. Itemize and name each issuer. | X | | | |
| 11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X | | | |
| Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | X | | | |
| Stock and interests in incorporated and unincorporated businesses. Itemize. | X | | | |
| 14. Interests in partnerships or joint ventures. Itemize. | Х | | | |
| 15. Government and corporate bonds and other negotiable and nonnegotiable instruments. | Х | | | |
| 16. Accounts receivable. | Х | | | |
| 17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars. | x | | | |
| 18. Other liquidated debts owed to debtor | 1 | Tax Refund | | 728.00 |

| In re | Ericka L. Smith | Case No. | |
|-------|-----------------|----------|------|
| | Debtor | (If kno | own) |

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| TYPE OF PROPERTY | NONE | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|---|------|---|--------------------------------------|--|
| Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | Х | | | |
| Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | Х | | | |
| 21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | Х | | | |
| 22. Patents, copyrights, and other intellectual property. Give particulars. | X | | | |
| 23. Licenses, franchises, and other general intangibles. Give particulars. | X | | | |
| 24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | | |
| 25. Automobiles, trucks, trailers, and other vehicles and accessories. | Х | | | |
| 26. Boats, motors, and accessories. | Χ | | | |
| 27. Aircraft and accessories. | X | | | |
| 28. Office equipment, furnishings, and supplies. | X | | | |
| 29. Machinery, fixtures, equipment and supplies used in business. | Х | | | |
| 30. Inventory. | X | | | |
| 31. Animals. | X | | | |
| 32. Crops - growing or harvested. Give particulars. | X | | | |
| 33. Farming equipment and implements. | X | | | |
| 34. Farm supplies, chemicals, and feed. | Χ | | | |
| 35. Other personal property of any kind not already listed. Itemize. | X | | | |
| | _ | 1 continuation sheets attached Tota | al > | \$ 3,611.00 |

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

☐11 U.S.C. § 522(b)(3)

| In re | Ericka L. Smith | Case No. | |
|-------|-----------------|------------|--|
| | Debtor | (If known) | |

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

| Debtor claims the exemptions to which debtor is entitled under: (Check one box) | ☐ Check if debtor claims a homestead exemption that exceeds \$146,450.* |
|---|---|
| √111 U.S.C. § 522(b)(2) | |

| DESCRIPTION OF PROPERTY | SPECIFY LAW PROVIDING EACH EXEMPTION | VALUE OF CLAIMED EXEMPTION | CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION |
|-------------------------|--|----------------------------------|--|
| Books & Pictures | 11 USC § 522(d)(3) | 200.00 | 200.00 |
| Cash | 11 USC § 522(d)(5) | 20.00 | 20.00 |
| Checking PNC Bank | 11 USC § 522(d)(5) | 263.00 | 263.00 |
| Clothing | 11 USC § 522(d)(3) | 350.00 | 350.00 |
| Erie Life - term policy | 11 USC § 522(d)(7) | Unknown | Unknown |
| Firearm | 11 USC § 522(d)(3) | 250.00 | 250.00 |
| Household Goods | 11 USC § 522(d)(3) | 1,550.00 | 1,550.00 |
| Jewelry | 11 USC § 522(d)(4) | 250.00 | 250.00 |
| Tax Refund | 11 USC § 522(d)(5) | 728.00 | 728.00 |

^{*} Amount subject to adjustment on 4/1/13 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

| In re | Ericka L. Smith | | , | Case No. | |
|-------|-----------------|--------|---------------|----------|------------|
| | | Debtor | : | • | (If known) |

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

 $\mathbf{\Lambda}$ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions, Above.) | CODEBTOR | HUSBAND, WIFE, JOINT OR COMMUNITY | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|---|----------|--------------------------------------|--|------------|--------------|----------|---|---------------------------------|
| ACCOUNT NO. NONE | | | VALUE | | | | | |

continuation sheets 0 attached

Subtotal > (Total of this page)

Total > (Use only on last page)

| \$ 0.00 | \$ 0.00 |
|------------|------------|
| \$ 0.00 | \$ 0.00 |

(Report also on Summary of (If applicable, report Schedules)

also on Statistical
Summary of Certain
Liabilities and
Related Data.)

In re Ericka L. Smith

Debtor

| Case | No. | |
|------|-----|-------|
| | | - |

(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

| ¥ | Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. |
|------|---|
| TYI | PES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.) |
| | Domestic Support Obligations |
| | Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or consible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in J.S.C. § 507(a)(1). |
| | Extensions of credit in an involuntary case |
| app | Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the pointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). |
| | Wages, salaries, and commissions |
| | Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying pendent sales representatives up to \$11,725* per person earned within 180 days immediately preceding the filing of the original petition, or the sation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). |
| | Contributions to employee benefit plans |
| ces | Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the sation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). |
| | Certain farmers and fishermen |
| | Claims of certain farmers and fishermen, up to \$5,775* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). |
| | Deposits by individuals |
| that | Claims of individuals up to \$2,600* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, were not delivered or provided. 11 U.S.C. § 507(a)(7). |
| | Taxes and Certain Other Debts Owed to Governmental Units |
| | Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). |
| | Commitments to Maintain the Capital of an Insured Depository Institution |
| | Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of ernors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. 17 (a)(9). |
| | Claims for Death or Personal Injury While Debtor Was Intoxicated |
| ano | Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, other substance. 11 U.S.C. § 507(a)(10). |
| | |

1 continuation sheets attached

| ln re | Ericka L. Smith | Case No. | |
|-------|--------------------|----------|------------|
| | Liioka Li Oillitii | , | (If known) |

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | HUSBAND, WIFE, JOINT OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM | AMOUNT ENTITLED TO PRIORITY | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|----------|--------------------------------------|--|------------|--------------|----------|--------------------|-----------------------------------|---|
| ACCOUNT NO. | | | | | | | | | \$0.00 |

Sheet no. $\underline{1}$ of $\underline{1}$ continuation sheets attached to Schedule of Creditors Holding Priority Claims

Subtotals ➤ (Totals of this page)

Total ➤ (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)

Total > (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)

| ſ | \$ 0.00 | \$ 0.00 | \$ 0.00 |
|---|------------|------------|------------|
| , | \$ 0.00 | | |
| | | \$ 0.00 | \$ 0.00 |

| In re | Ericka L. Smith | Case No. | |
|-------|-----------------|----------|------------|
| | Debtor | | (If known) |

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| Check this box is debter has no orealer | | | · | | | | |
|--|----------|--------------------------------------|--|------------|--------------|----------|--------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | HUSBAND, WIFE, JOINT OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. 6658 | | | 01/14/2010 | | | | 857.00 |
| CAPITAL ONE PO BOX 30281 SALT LAKE CITY, UT 84130 | | | Credit Account | | | | |
| ACCOUNT NO. 1815 | | | 05/25/2010 | | | | 3,414.00 |
| CAPITAL ONE PO BOX 30253 SALT LAKE CITY, UT 84130 | | | Credit Account | | | | |
| ACCOUNT NO. 4208 | | | 04/01/2012 | | | | 413.00 |
| COMENITY BANK PIER 1 PO BOX 182789 COLUMBUS, OH 43218 | | | Credit Account | | | | |
| ACCOUNT NO. 12702 | | | 11/16/2013 | | | | 1,117.00 |
| EMERG CARE PHYSICIANS OF PA PC PO BOX 740021 CINCINNATI, OH 45274 AKRON BILLING CENTER 3585 RIDGE PARK DR AKRON, OH 44333 | | | Collection Account | | | | |

3 Continuation sheets attached

Subtotal > \$ 5,801.00

Total > (Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)

| n re | Ericka L. Smith | Case No. |
|------|-----------------|------------|
| | Debtor | (If known) |

| (Continuation Sheet) | | | | | | | |
|---|----------|--------------------------------------|--|------------|--------------|----------|--------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | HUSBAND, WIFE, JOINT OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. 1888 | | | 11/01/2012 | | | | 3,369.00 |
| GEMB RETAIL PO BOX 981432 EL PASO, TX 79998 | | • | Collection Account | | | | |
| CACH LLC 4340 S MONACO ST UNIT 2 DENVER, CO 80237 | | • | | | | | |
| ACCOUNT NO. 1818 | | | 11/01/2012 | | | | 3,516.00 |
| HSBC NV PO BOX 19360 PORTLAND, OR 97280 | | | Collection Account | | | | |
| CAVALRY PORTFOLIO SERV 500 SUMMIT LAKE DRIVE STE 400 VALHALLA, NY 10595 | | | | | | | |
| ACCOUNT NO. 5301 | | | 11/16/2013 | | | | 244.00 |
| MONROE RADIOLOGY IMAGING PC PO BOX 12B E STROUDSBURG, PA 18301 | | | Medical Bill | | | | |
| ACCOUNT NO. 3699 | | | 05/15/2013 | | | | 120.00 |
| PLANNED PARENTHOOD KEYSTONE PO BOX 813 TREXLERTONW, PA 18087 | | | Medical Bill | | | | |

Sheet no. $\,\underline{1}$ of $\underline{3}$ continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal > 7,249.00 (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical

Summary of Certain Liabilities and Related Data.)

Page 15 of 43

Main Document

| In re | Ericka L. Smith | Case No |
|-------|-----------------|------------|
| | Debtor | (If known) |

| (Continuation Sheet) | | | | | | | |
|---|----------|--------------------------------------|--|------------|--------------|----------|--------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | HUSBAND, WIFE, JOINT OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. 71135 | | | 01/01/2008 | | | | 170.00 |
| POCONO EMERG PHYSICIANS PO BOX 8510 PHILADELPHIA, PA 19101 NCO FINANCIAL PO BOX 15636 PHILADELPHIA, PA 19850 | | | Collection Account | | | | |
| ACCOUNT NO. 8253 | | | 11/21/2013 | | | | 3,591.00 |
| POCONO MEDICAL CENTER PO BOX 822009 PHILADELPHIA, PA 19182 | | | Medical Bill | | | | |
| POCONO MEDICAL CENTER 206 E BROWN ST E STROUDSBURG, PA 18301 | | | | | | | |
| REMIT CORP 36 W MAIN ST PO BOX 7 BLOOMSBURG, PA 17815 | | | | | | | |
| ACCOUNT NO. 3432 | | | 11/06/2006 | | | | 11,288.00 |
| SUNTRUST PO BOX 85526 RICHMOND, VA 23285 | | | Repo deficiency | | | | |

Sheet no. $\,\underline{2}\,$ of $\underline{3}\,$ continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal > 15,049.00

(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)

| In re | Ericka L. Smith | Case No. | |
|-------|-----------------|------------|--|
| | Debtor | (If known) | |

(Continuation Sheet)

| | | | (Continuation Sheet) | | | | |
|---|----------|--------------------------------------|--|------------|--------------|----------|--------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | HUSBAND, WIFE, JOINT OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. 762 | | | 11/01/2008 | | | | 235.00 |
| WILKES BARRE GENERAL HOSPITAL 575 N RIVER ST WILKES BARRE, PA 18764 | | Collection Account | | | | | |
| NATIONAL RECOVERY AGENCY 2491 PAXTON ST HARRISBURG, PA 17111 | | | | | | | |

Sheet no. $\underline{3}$ of $\underline{3}$ continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal > \$ 235.00

Total > \$ 28,334.00

(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)

| In re: | Ericka L. Smith | Case No. | |
|--------|-----------------|----------|------------|
| | Debtor | | (If known) |

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

☑ Check this box if debtor has no executory contracts or unexpired leases.

| NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT. | DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST, STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT. |
|---|--|
| | |

B6H (Official Form 6H) (12/07)

| n re: Ericka L. Smith | Case No(If known) | | | | | | | |
|--|------------------------------|--|--|--|--|--|--|--|
| SCHEDULE H - CODEBTORS | | | | | | | | |
| ☑ Check this box if debtor has no codebtors. | | | | | | | | |
| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR | | | | | | | |

| | | Cas |
|--------|---------------|-----|
| | , | |
| Debtor | | |

(If known)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

| Debtor's Marital Status: Single | DEPENDENTS OF | | | | |
|--|--|-------------------|--|---------------|--------|
| eg.c | RELATIONSHIP(S): | | | AGE | (S): |
| Employment: | DEBTOR | | SPOUSE | | |
| Occupation Asso | ociate | | | | |
| Name of Employer Sally | Beauty | | | | |
| How long employed 3 year | - | | | | |
| Address of Employer | | | | | |
| INCOME: (Estimate of average or case filed) | projected monthly income at time | 1 | DEBTOR | | SPOUSE |
| 1. Monthly gross wages, salary, an | d commissions | \$ | 1,528.57 | \$_ | |
| (Prorate if not paid monthly.) 2. Estimate monthly overtime | | \$ - | 0.00 | \$_ | |
| 3. SUBTOTAL | | \$ | 1,528.57 | \$_ | |
| 4. LESS PAYROLL DEDUCTION | S | <u> </u> | <u> </u> | | |
| a. Payroll taxes and social se | ecurity | \$ | 369.87 | \$ _ | |
| b. Insurance | | \$ | 0.00 0.00 | \$ _ \$ | |
| c. Union dues | | \$. | | Ψ _ | |
| d. Other (Specify) | | | 0.00 | \$ _ | |
| 5. SUBTOTAL OF PAYROLL DE | DUCTIONS | \$ _ | 369.87 | \$_ | |
| 6. TOTAL NET MONTHLY TAKE | HOME PAY | \$ _ | 1,158.70 | \$_ | |
| 7. Regular income from operation of | of business or profession or farm | | | | |
| (Attach detailed statement) | | \$ | 0.00 | \$_ | |
| 8. Income from real property | | \$ | 0.00 | \$_ | |
| 9. Interest and dividends | | \$ | 0.00 | \$_ | |
| Alimony, maintenance or supported debtor's use or that of dependent | ort payments payable to the debtor for the dents listed above. | \$ | 0.00 | \$ | |
| 11. Social security or other governr | | Ψ. | | _ | |
| (Specify) | | \$ | 0.00 | \$_ | |
| 12. Pension or retirement income | | \$ | 0.00 | \$_ | |
| 13. Other monthly income | 4.2 | c | 22.27 | Φ. | |
| (Specify) Tax Refund (pro-ra | <u>ta)</u> | \$_ | 60.67 | \$_ | 0.00 |
| 14. SUBTOTAL OF LINES 7 THR | ROUGH 13 | \$ | 60.67 | \$_ | |
| 15. AVERAGE MONTHLY INCOM | ME (Add amounts shown on lines 6 and 14) | \$ _ | 1,219.37 | \$_ | |
| 16. COMBINED AVERAGE MON totals from line 15) | THLY INCOME: (Combine column | | \$ 1,219 | 9.37 | |
| | | | also on Summary of Sch cal Summary of Certain L | | |
| 17. Describe any increase or decre | ease in income reasonably anticipated to occur within | n the year follow | ving the filing of this docu | ument. | : |

| In re Ericka L. Smith | | Case No. |
|-----------------------|--------|------------|
| | Debtor | (If known) |

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

| Complete this schedule by estimating the average or projected monthly expenses of any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate. The differ from the deductions from income allowed on Form22A or 22C. | | |
|--|---|----------|
| Check this box if a joint petition is filed and debtor's spouse maintains a separate ho expenditures labeled "Spouse." | usehold. Complete a separate schedule of | |
| Rent or home mortgage payment (include lot rented for mobile home) | \$ | 200.00 |
| a. Are real estate taxes included? Yes No ✓ | | 200.00 |
| b. Is property insurance included? Yes No ✓ | _ | |
| 2. Utilities: a. Electricity and heating fuel | | 0.00 |
| b. Water and sewer | \$ | 0.00 |
| c. Telephone | \$ | 65.00 |
| d. Other | <u> </u> | 0.00 |
| 3. Home maintenance (repairs and upkeep) | <u> </u> | 0.00 |
| 4. Food | \$ | 300.00 |
| 5. Clothing | \$ | 65.00 |
| 6. Laundry and dry cleaning | \$ | 45.00 |
| 7. Medical and dental expenses | \$ | 30.00 |
| Transportation (not including car payments) | \$ | 200.00 |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc. | \$ | 100.00 |
| 10. Charitable contributions | \$ | 5.00 |
| 11. Insurance (not deducted from wages or included in home mortgage payments) | | |
| a. Homeowner's or renter's | \$ | 0.00 |
| b. Life | \$ | 30.00 |
| c. Health | \$ | 131.00 |
| d. Auto | \$ | 0.00 |
| e. Other | \$ | 0.00 |
| 12. Taxes (not deducted from wages or included in home mortgage payments) | | |
| (Specify) | \$ | 0.00 |
| 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be inc | luded in the plan) | _ |
| a. Auto | \$ | 0.00 |
| b. Other | \$ | 0.00 |
| 14. Alimony, maintenance, and support paid to others | \$ | 0.00 |
| 15. Payments for support of additional dependents not living at your home | \$ | 0.00 |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed state | rement) \$ | 0.00 |
| 17. Other | \$ | 0.00 |
| Storage | \$ | 106.00 |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Sc | hedules and | |
| if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) | \$ | 1,277.00 |
| 10. Describe any increase or degrees in expanditures recease by entiring to the continue to th | thin the year following the filling of this described | mont: |
| 19. Describe any increase or decrease in expenditures reasonably anticipated to occur wi | • | |
| Debtor may be starting a new out of town job at \$10.00 per hour (in Ju commuting expense which will offset the increase. | ne) but, will also incur a very large | ; |
| 20. STATEMENT OF MONTHLY NET INCOME | | |
| a. Average monthly income from Line 15 of Schedule I | \$ | 1,219.37 |
| b. Average monthly expenses from Line 18 above | \$ | 1,219.37 |
| c. Monthly net income (a. minus b.) | \$ | -57.63 |
| or menting flor modifie (at filling 5.) | <u> </u> | -51.03 |

| In re Ericka L. Smith | | Case No. | |
|-----------------------|-------------------------------|--------------------|------------|
| | Debtor | _ | (If known) |
| | DECLARATION CONCERNING | DEBTOR'S SCHEDULES | S |

| | DECLARATION UNDER PENALTY | Y OF PER | JURY BY INDIVIDUA | L DEBTOR |
|-------|--|----------------|----------------------------|----------|
| | declare under penalty of perjury that I have read the foregoing summ and that they are true and correct to the best of my knowledge, info | • | · · · · — | 17 |
| Date: | 5/16/2014 | Signature: | /s/ Ericka L. Smith | |
| | | • | Ericka L. Smith | |
| | | | | Debtor |
| | | [If joint case | e, both spouses must sign] | |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C §§ 152 and 3571.

United States Bankruptcy Court Middle District of Pennsylvania

| In re Ericka L. Smith | | Case No. | |
|-----------------------|--------|----------|---|
| | Debtor | Chapter | 7 |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
|---|----------------------|---------------|----------------|-----------------|----------------|
| A - Real Property | NO | 1 | \$ 0.00 | | |
| B - Personal Property | YES | 2 | \$ 3.611.00 | | |
| C - Property Claimed as Exempt | NO | 1 | | | |
| D - Creditors Holding Secured Claims | NO | 1 | | \$ 0.00 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | NO | 2 | | \$ 0.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | YES | 4 | | \$ 28,334.00 | |
| G - Executory Contracts and Unexpired Leases | NO | 1 | | | |
| H - Codebtors | NO | 1 | | | |
| I - Current Income of Individual Debtor(s) | YES | 1 | | | \$ 1,219.37 |
| J - Current Expenditures of Individual Debtor(s) | YES | 1 | | | \$ 1,277.00 |
| TOTAL | | 15 | \$ 3,611.00 | \$ 28,334.00 | |

United States Bankruptcy Court Middle District of Pennsylvania

| In re | Ericka L. Smith | Case No. | |
|-------|---|------------------|----------------------------|
| | Debtor | , Chapter | 7 |
| | STATISTICAL SUMMARY OF CERTAIN LIABILITIE | ES AND RELATED [| DATA (28 U.S.C. § 159) |
| § 101 | If you are an individual debtor whose debts are primarily consumer debts, (8)), filing a case under chapter 7, 11 or 13, you must report all information requ | • , | Sankruptcy Code (11 U.S.C. |

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | | nount |
|---|----|-------|
| Domestic Support Obligations (from Schedule E) | \$ | 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | \$ | 0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | \$ | 0.00 |
| Student Loan Obligations (from Schedule F) | \$ | 0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E. | \$ | 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | \$ | 0.00 |
| TOTAL | \$ | 0.00 |

State the following:

| Average Income (from Schedule I, Line 16) | \$ 1,219.37 |
|--|----------------|
| Average Expenses (from Schedule J, Line 18) | \$ 1,277.00 |
| Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C Line 20) | \$ 1,396.52 |

State the following:

| Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | \$ 0.00 |
|--|---------|--------------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column. | \$ 0.00 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | \$ 0.00 |
| 4. Total from Schedule F | | \$ 28,334.00 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | \$ 28,334.00 |

UNITED STATES BANKRUPTCY COURT Middle District of Pennsylvania

| re: | Ericka L. Smith | | Case No | | |
|------|---|------------------------------------|--------------------|--|--|
| • | | Debtor | (If known) | | |
| | | STATEMENT OF FINA | NCIAL AFFAIRS | | |
| | 1. Income from 6 | employment or operation of busines | SS | | |
| lone | State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) | | | | |
| | AMOUNT | SOURCE | FISCAL YEAR PERIOD | | |
| | 4,064.00 | Just the Touch | 2012 | | |
| | 15,538.00 | Regis | 2013 | | |
| | 5,857.00 | Sally Beauty & Regis | 2014 | | |
| None | 2. Income other than from employment or operation of business State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) | | | | |
| | AMOUNT | SOURCE | FISCAL YEAR PERIOD | | |
| | 8,445.00 | UC | 2012 | | |

Complete a. or b., as appropriate, and c.

None **☑** a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF DATES OF AMOUNT AMOUNT CREDITOR PAYMENTS PAID STILL OWING

None $\mathbf{\Lambda}$

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF PAYMENTS/ **TRANSFERS** **AMOUNT** PAID OR VALUE OF **TRANSFERS**

AMOUNT STILL **OWING**

*Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

None Ø

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF **PAYMENT** **AMOUNT** PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER

NATURE OF PROCEEDING

COURT OR AGENCY

AND LOCATIO

STATUS OR DISPOSITION

 $\mathbf{\Lambda}$

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DESCRIPTION OF PERSON FOR WHOSE DATE OF AND VALUE OF BENEFIT PROPERTY WAS SEIZED SEIZURE **PROPERTY**

5. Repossessions, foreclosures and returns

None $\mathbf{\Delta}$

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DESCRIPTION DATE OF REPOSSESSION, AND VALUE OF FORECLOSURE SALE, **PROPERTY** TRANSFER OR RETURN

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

TERMS OF

NAME AND ADDRESS DATE OF ASSIGNMENT
OF ASSIGNEE ASSIGNMENT OR SETTLEMENT

None **☑**

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS

NAME AND ADDRESS

OF COURT

OF CUSTODIAN

NAME AND ADDRESS

OF COURT

CASE TITLE & NUMBER

ORDER

DESCRIPTION

AND VALUE OF

PROPERTY

7. Gifts

None **☑** List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS RELATIONSHIP DESCRIPTION
OF PERSON TO DEBTOR, DATE AND VALUE OF
OR ORGANIZATION IF ANY OF GIFT GIFT

8. Losses

None **☑** List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION DESCRIPTION OF CIRCUMSTANCES AND, IF

AND VALUE OF LOSS WAS COVERED IN WHOLE OR IN PART DATE OF

PROPERTY BY INSURANCE, GIVE PARTICULARS LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE OF PAYMENT, AMOUNT OF MONEY OR
OF PAYEE

NAME OF PAYOR IF
DESCRIPTION AND VALUE

Philip W. Stock, Attorney 706 Monroe Street Stroudsburg, PA 18360 OTHER THAN DEBTOR OF PROPERTY

2/19/14 Attorney Fee: 800.00

Filing Fee: 306.00

10. Other transfers

None $\mathbf{\Lambda}$

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIBE PROPERTY

TRANSFERRED

AND VALUE RECEIVED

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

None \mathbf{Z}

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR

INTEREST IN PROPERTY

11. Closed financial accounts

None $\mathbf{\Delta}$

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE **AMOUNT AND** DATE OF SALE **OR CLOSING**

12. Safe deposit boxes

None $\mathbf{\Lambda}$

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR

NAMES AND ADDRESSES OF THOSE WITH ACCESS

DESCRIPTION

DATE OF TRANSFER OR SURRENDER,

OF

OTHER DEPOSITORY TO BOX OR DEPOSITOR **CONTENTS** IF ANY

13. Setoffs

None V

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF **SETOFF**

14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS DESCRIPTION AND VALUE

OF OWNER OF PROPERTY LOCATION OF PROPERTY

15. Prior address of debtor

None ☑

 \mathbf{Q}

If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None **☑** If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor 's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None

 \square

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

SITE NAME AND NAME AND ADDRESS DATE OF ENVIRONMENTAL

ADDRESS OF GOVERNMENTAL UNIT NOTICE LAW

None **☑**

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND NAME AND ADDRESS DATE OF ENVIRONMENTAL ADDRESS OF GOVERNMENTAL UNIT NOTICE LAW

None $\mathbf{\nabla}$

List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None \square

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within the six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the business, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

LAST FOUR DIGITS

OF SOCIAL SECURITY ADDRESS OR OTHER INDIVIDUAL

TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN NATURE OF BUSINESS

BEGINNING AND ENDING

DATES

None \square

NAME

Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

| JAME | ADDRESS |
|------|---------|

[if completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date | 5/16/2014 | Signature | /s/ Ericka L. Smith | |
|------|-----------|-----------|---------------------|--|
| | | of Debtor | Ericka L. Smith | |

B22A (Official Form 22A) (Chapter 7) (12/10)

| | | statement (check one box as directed in Part I, III, or VI of this |
|--------------------|-----------|--|
| In re Ericka L. Sm | nith | statement): |
| D | Debtor(s) | ☐ The presumption arises |
| Case Number: | | The presumption does not arise |
| <u> </u> | f known) | ☐ The presumption is temporarily inapplicable. |

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by § 707(b)(2)(C).

| | Part I. MILITARY AND NON-CONSUMER DEBTORS |
|----|--|
| 1A | Disabled Veterans. If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement. |
| IA | □ Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)). |
| 1B | Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement. |
| | ☐ Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts. |
| | Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends. |
| 1C | ☐ Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard |
| | a. |
| | ☐ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed; |
| | OR |
| | b. I am performing homeland defense activity for a period of at least 90 days /or/ |
| | □ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed. |
| | Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION |
| | |

| 2 | Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. a. ✓ Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11. b. ☐ Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." Complete only Column A ("Debtor's Income") for Lines 3-11. c. ☐ Married, not filing jointly, without the declaration of separate households set out in line 2.b above. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11. d. ☐ Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") | | | | |
|----|--|---|--|--------------------------------|--------------------------------|
| | All figures must reflect average monthly incoms ix calendar months prior to filing the bankrup before the filing. If the amount of monthly incodivide the six-month total by six, and enter the | tcy case, ending on the me varied during the | he last day of the month six months, you must | Column A Debtor's Income | Column B Spouse's Income |
| 3 | Gross wages, salary, tips, bonuses, overting | ne, commissions. | | \$1,396.52 | \$ |
| 4 | Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V. | | | | |
| | a. Gross Receipts b. Ordinary and necessary business expenses | | \$ 0.00 \$ 0.00 | | |
| | c. Business income | | Subtract Line b from Line a | \$0.00 | \$ |
| 5 | Rent and other real property income. Subtrain the appropriate column(s) of Line 5. Do not include any part of the operating expenses a. Gross Receipts b. Ordinary and necessary operating expenses | enter a number les entered on Line b a | s than zero. Do not | \$0.00 | \$ |
| | c. Rent and other real property income | | Subtract Line b from Line a | | |
| 6 | Interest, dividends, and royalties. | | | \$0.00 | \$ |
| 7 | Pension and retirement income. | | | \$0.00 | \$ |
| 8 | Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B. | | | | \$ |
| 9 | Unemployment compensation. Enter the am However, if you contend that unemployment cowas a benefit under the Social Security Act, do Column A or B, but instead state the amount in | ompensation received not list the amount of | d by you or your spouse | | |
| | Unemployment compensation claimed to be a benefit under the Social Security Act | Debtor \$ | Spouse \$ | \$0.00 | \$ |
| 10 | Income from all other sources. Specify sour sources on a separate page. Do not include a paid by your spouse if Column B is com alimony or separate maintenance. Do not security Act or payments received as a victim a victim of international or domestic terrorism. | nlimony or separate include, but include include any benefits of a war crime, crim | maintenance payments e all other payments of received under the Social | | |

| | a. \$ Total and enter on Line 10. | \$0.00 | \$ | | |
|----|---|--------------------|-------------|--|--|
| 11 | Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 thru 10 in Column B. Enter the total(s). | \$1,396.52 | \$ | | |
| 12 | Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A. | | | | |
| | Part III. APPLICATION OF § 707(b)(7) EXCLUSION | | | | |
| 13 | Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the num the result. | ber 12 and enter | \$16,758.24 | | |
| 14 | Applicable median family income. Enter the median family income for the applicable state and house information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | ehold size. (This | | | |
| | a. Enter debtor's state of residence: PAb. Enter debtor's household size: | | \$47,439.00 | | |
| | Application of Section 707(b)(7). Check the applicable box and proceed as directed. | | | | |
| 15 | ☑ The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII. | | | | |
| | ☐ The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts | of this statement. | | | |

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15).

| | Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2) | | | | | |
|-----|---|----|--|--|--|--|
| 16 | Enter the amount from Line 12. | \$ | | | | |
| 17 | Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero. | | | | | |
| | a. \$ | | | | | |
| | Total and enter on Line 17. | \$ | | | | |
| 18 | Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result. | \$ | | | | |
| | Part V. CALCULATION OF DEDUCTIONS FROM INCOME | | | | | |
| | Subpart A: Deductions under Standards of the Internal Revenue Service (IRS) | | | | | |
| 19A | National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable number of persons. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. | \$ | | | | |
| | | | | | | |

| 19B | Outof- Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total health care | | | | | | | |
|-----|---|----------------------------|---|--|------------------------------|--|--------------------------------------|----|
| | | | , and enter the result in Line ons under 65 years of age | 196. | Pers | ons 65 years of age or olde | r | |
| | а | a1. A | llowance per person | | a2. | Allowance per person | | |
| | b | o1. N | umber of persons | | b2. | Number of persons | | |
| | С | :1. S | ubtotal | | c2. | Subtotal | | \$ |
| 20A | an is co | nd Uti availa onsist | lities Standards; non-mortga able at <u>www.usdoj.gov/ust/</u> c | ge expenses for the from the clerk of the cl | he app f the b ed as e | xpenses. Enter the amount of licable county and family size ankruptcy court). The applica xemptions on your federal incorport. | e. (This information ble family size | \$ |
| 20B | Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. Do not enter an amount less than zero. | | | | | | | |
| | а | ì. | IRS Housing and Utilities Stand | | | Ψ | | |
| | b |). | Average Monthly Payment for ar any, as stated in Line 42. | ny debts secured by h | nome, if | \$ | | |
| | С |) . | Net mortgage/rental expense | | | Subtract Line b from Line a |] | \$ |
| 21 | Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below: | | | | | \$ | | |
| 22A | If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | | | | \$ | | | |
| 22B | ex ac an | penseddition | es for a vehicle and also use nal deduction for your public | public transporta transportation exp | tion, a censes | sportation expense. If you paind you contend that you are ear, enter on Line 22B the "Publinount is available at | | |

| 23 | Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) 1 2 or more. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs b. Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42. c. Net ownership/lease expense for Vehicle 1 Subtract Line b from Line a | | | | |
|---|--|--|-----------------------------------|----|--|
| 24 | Local Standards: transportation ownership/lease expense the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" fr (available at www.usdoj.gov/ust/ or from the clerk of the bank Average Monthly Payments for any debts secured by Vehicle Line a and enter the result in Line 24. Do not enter an amount | om the IRS Local Standards ruptcy court); enter in Line b 2, as stated in Line 42; subtr | : Transportation the total of the | | |
| | a. IRS Transportation Standards, Ownership Costsb. Average Monthly Payment for any debts secured by Vehicle 2, | \$ | | | |
| | as stated in Line 42 c. Net ownership/lease expense for Vehicle 2 | Subtract Line b from Line a | | \$ | |
| 25 | Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes. social security taxes. and Medicare taxes. Do not include real estate or sales taxes. | | | \$ | |
| 26 | | | | \$ | |
| 27 | Other Necessary Expenses: life insurance. Enter total avera pay for term life insurance for yourself. Do not include premit whole life or for any other form of insurance. | | | \$ | |
| 28 | Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44. | | | \$ | |
| 29 | Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. | | | \$ | |
| 30 | Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. | | | \$ | |
| 31 | Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34. | | | \$ | |
| 32 | Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that | | | \$ | |
| Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32. | | | | | |
| | Subpart B: Additional Living | Expense Deductions | | | |

| | | Note | : Do not include any expens | es that you have list | ed in Lines 19-32 | |
|-----|--|--|--|--------------------------|-------------------------------------|----------|
| | | | ility Insurance, and Health S | | | |
| | | es in the categories e, or your dependen | s set out in lines a-c below tha | t are reasonably nece | ssary for yourself, your | |
| | a. | Health Insurance | | 1\$ | | |
| 34 | b. | Disability Insurar | | \$ | | |
| | C. | Health Savings A | | \$ | | |
| | L | <u> </u> | | | | |
| | Total a | and enter on Line 34 | 1 | | | \$ |
| | | | rpend this total amount, state | e vour actual total ave | rage monthly expenditures in | |
| | | ace below: | pona imo total amount, state | o your doldar lolar ave | rage monthly experiences in | |
| | \$ | | | | | |
| | Contin | ued contributions | s to the care of household or | r family members. Fr | nter the total average actual | |
| 0.5 | | | u will continue to pay for the re | | | C |
| 35 | • | • | disabled member of your house | ehold or member of yo | our immediate family who is | \$ |
| | | to pay for such exp | | | | |
| 36 | | | ly violence. Enter the total average aintain the safety of your fami | | | \$ |
| 30 | | | | | required to be kept confidential | Ψ |
| | by the | | | · | · · · | |
| | | | er the total average monthly a | | | |
| 37 | | | ing and Utilities, that you actua | | | \$ |
| | | provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. | | | | |
| | | | | | average monthly expenses that | |
| | | | exceed \$147.92* per child, for | | | |
| 38 | second | lary school by your | dependent children less than | 18 years of age. You | must provide your case | |
| | | | | | ain why the amount claimed | \$ |
| | is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the total average monthly amount by which your food and | | | | | |
| | clothin | g expenses exceed | the combined allowances for | food and clothing (app | parel and services) in the IRS | |
| 39 | National Standards, not to exceed 5% of those combined allowances. (This information is available at | | | | | |
| | www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. | | | | | \$ |
| | | | | | | <u> </u> |
| 40 | | | | | o contribute in the form of cash or | |
| | financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). | | | | | \$ |
| | T-4-1 / | N -1 -1141 1 | - Dadustianadan 6 707/L | . Foton the tetal of Lin | 04 than | |
| 41 | Total Additional Expense Deductions under § 707(b). Enter the total of Lines 34 through 40. | | | | | \$ |
| | | | Subpart C: Deduct | tions for Debt Paym | ent | |
| | Future | payments on sec | cured claims. For each of you | r debts that is secured | d by an interest in property that | |
| | you ow | n, list the name of | the creditor, identify the prope | erty securing the debt, | state the Average Monthly | |
| | Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the | | | | | |
| | | | ase, divided by 60. If necessary | | | |
| 42 | | | onthly Payments on Line 42. | | | |
| | | Name of | Property Securing the Debt | Average | Does payment | |
| | | Creditor | 1, 1, 9, 111111119 1110 2001 | Monthly | include taxes | |
| | a. | | | Payment \$ | or insurance? ☐ yes ☐ no | |
| | <u>~.</u> | | | T | | ¢ |
| | | | | | Total: Add Lines a. b and c | I D |

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

| 43 | Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. | | | | |
|----|--|----------------------------|----|--|--|
| | | /60th of the Cure Amount | ድ | | |
| | To | otal: Add Lines a, b and c | \$ | | |
| 44 | Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 28. | | | | |
| 45 | Chapter 13 administrative expenses. If you are eligible to file a case under Chafollowing chart, multiply the amount in line a by the amount in line b, and enter the expense. a. Projected average monthly Chapter 13 plan payment. b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) c. Average monthly administrative expense of Chapter 13 case | | \$ | | |
| 46 | Total Deductions for Debt Payment. Enter the total of Lines 42 through 45. | | | | |
| | Subpart D: Total Deductions from Income | | | | |
| 47 | Total of all deductions allowed under § 707(b)(2). Enter the total of Lines 33, | 41, and 46. | \$ | | |

| | Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION | | | |
|----|---|-------------------|--|--|
| 48 | Enter the amount from Line 18 (Current monthly income for § 707(b)(2)) | \$ | | |
| 49 | Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2)) | \$ | | |
| 50 | Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result | \$ | | |
| 51 | 60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the result. | \$ | | |
| 52 | Initial presumption determination. Check the applicable box and proceed as directed. The amount on Line 51 is less than \$7,025* Check the box for "The presumption does not arise" at the top of page statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI. The amount set forth on Line 51 is more than \$11,725*. Check the box for "The presumption arises" at the top statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VIII. The amount on Line 51 is at least \$7,025*, but not more than \$11,725*. Complete the remainder of Part VIII. The amount on Line 51 is at least \$7,025*, but not more than \$11,725*. | of page 1 of this | | |
| 53 | Enter the amount of your total non-priority unsecured debt | \$ | | |
| 54 | Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result. | \$ | | |
| 55 | Secondary presumption determination. Check the applicable box and proceed as directed. The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not aris page 1 of this statement, and complete the verification in Part VIII. The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presum the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. | | | |

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

| | Part VII. ADDITIONAL EXPENSE C | LAIMS | | | |
|----|--|----------------|--|--|--|
| 56 | tated in this form, that are required for the in additional deduction from your current ces on a separate page. All figures should | | | | |
| | Expense Description | Monthly Amount | | | |
| | Total: Add Lines a, b, and c | \$ | | | |
| | Part VIII: VERIFICATION | | | | |
| 57 | I declare under penalty of perjury that the information provided in this stater both debtors must sign.) Date: 5/16/2014 Signature: /s/ Ericka L. S | , | | | |

Date: 5/16/2014

UNITED STATES BANKRUPTCY COURT Middle District of Pennsylvania

| In re | Ericka l Debt | a L. Smith , ebtor | | Case No. Chapter 7 | |
|--------------------------|--|----------------------------------|-----------------------|------------------------------|-----------------------------|
| CHAF | PTER 7 INDIVIDU | JAL DEBTO | R'S STATEME | ENT OF IN | TENTION |
| | bts secured by property of f the estate. Attach additio | | | ted for EACH de | bt which is secured |
| Property No | o. 1 | | | | |
| Creditor's Name: None | | Describe Property Securing Debt: | | | |
| 1 . | II be <i>(check one)</i> : rrendered | ☐ Retained | | | |
| ☐ Re | the property, I intend to (deceme the property) affirm the debt | heck at least one): | | | |
| ☐ Ot | her. Explain | | _ (for example, avoid | l lien using 11 U. | S.C. § 522(f)) |
| Droporty io | (abaak ana) | | | | |
| | (check one): aimed as exempt | | ■ Not claimed as ex | empt | |
| | rsonal property subject to ed lease. Attach additional o. 1 | | | Part B must be co | ompleted for |
| Lessor's Name: None | | Describe Leased Property: | | Lease will be to 11 U.S.C. § | Assumed pursuant 365(p)(2): |
| I declare und | nuation sheets attached (i ler penalty of perjury tha ebt and/or personal prop | t the above indica | | to any property | of my estate |

<u>/s/ Ericka L. Smith</u> Ericka L. Smith Signature of Debtor

UNITED STATES BANKRUPTCY COURT Middle District of Pennsylvania

| | | IVIIC | idle District of F | emisyivama | | |
|-------------|--|---|-----------------------------|---|-----------------|----------|
| In re: | Ericka L. Smith | | | | e No. | |
| | | Debtor | | <u>Cha</u> | pter <u>7</u> | |
| | DIS | CLOSURE C | F COMPENS | SATION OF ATTOR | NEY | |
| and paid | | ne within one year befored or to be rendered on b | e the filing of the petitio | m the attorney for the above-name n in bankruptcy, or agreed to be contemplation of or in | ed debtor(s) | |
| | For legal services, I have a | greed to accept | | | \$ | 800.00 |
| | Prior to the filing of this stat | ement I have received | | | \$ | 800.00 |
| | Balance Due | | | | \$ | 0.00 |
| 2. The | e source of compensation pa | aid to me was: | | | | |
| | ✓ Debtor | | Other (specify) | | | |
| 3. The | e source of compensation to | be paid to me is: | | | | |
| | □ Debtor | | Other (specify) | | | |
| 4. ₩ | I have not agreed to sha of my law firm. | re the above-disclosed of | compensation with any | other person unless they are mem | bers and associ | ates |
| | my law firm. A copy of the attached. | ne agreement, together | with a list of the names | or persons who are not members of the people sharing in the compe | ensation, is | f |
| | eturn for the above-disclose cluding: | d fee, I have agreed to r | ender legal service for a | ill aspects of the bankruptcy case, | | |
| a) | Analysis of the debtor's f a petition in bankruptcy; | inancial situation, and re | endering advice to the d | ebtor in determining whether to file | € | |
| b) | Preparation and filing of | any petition, schedules, | statement of affairs, an | d plan which may be required; | | |
| c) | Representation of the de | ebtor at the meeting of cr | reditors and confirmation | n hearing, and any adjourned hear | rings thereof; | |
| d) | Representation of the de | ebtor in adversary procee | edings and other contes | ted bankruptcy matters; | | |
| e) | [Other provisions as nee | ded] | | | | |
| 6. By | agreement with the debtor(s | s) the above disclosed fe | ee does not include the | following services: | | |
| | Post-petition Amen | dments, Continuan | ces, Lien Avoidanc | es, Motions for Relief or Ad | Iversary Proc | eedings. |
| | | | CERTIFICAT | ION | | |
| | certify that the foregoing is a esentation of the debtor(s) in | • | | ement for payment to me for | | |
| Date | d: <u>5/16/2014</u> | | | | | |
| | | | /s/ Philip W. | Stock | | |
| | | | Philip W. Sto | ock, Esquire, Bar No. 53203 | 3 | |
| | | | Law Office | of Philip W. Stock | | |

Attorney for Debtor(s)

UNITED STATES BANKRUPTCY COURT MIDDLE DISTRICT OF PENNSYLVANIA

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$46 administrative fee, \$15 trustee surcharge: Total fee \$306)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$46 administrative fee: Total fee \$281)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$46 administrative fee: Total fee \$1046)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$46 administrative fee: Total fee \$246)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

UNITED STATES BANKRUPTCY COURT MIDDLE DISTRICT OF PENNSYLVANIA

| In re Ericka L. Smith Debtor | Case No | _ |
|---|--|-----------|
| Desitor | Chapter7 | 7 |
| | ON OF NOTICE TO CONSUMER DEE § 342(b) OF THE BANKRUPTCY CO | • • |
| L the debtor, affirm that I have received and | Certificate of the Debtor If read this notice, as required by § 342(b) of the Bankruptcy | / Code |
| Ericka L. Smith | X/s/ Ericka L. Smith | 5/16/2014 |
| Printed Name of Debtor | Ericka L. Smith Signature of Debtor | Date |
| Case No. (if known) | <u> </u> | |
| | | |
| | | |
| | | |
| | | |

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.